

For your



Commonwealth of Massachusetts
Group Insurance Commission

Your
Benefits
Connection

BENEFIT

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Mitt Romney, Governor

Robert W. Hungate, Chair

Dolores L. Mitchell, Executive Director

Summer 2005

GROUP INSURANCE COMMISSION

*Providing Massachusetts State
Employees, Retirees, and Their
Dependents with Access to
Quality Care at
Reasonable Costs*

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Select & Save Plans Gain Members

GIC enrollees appeared to be generally satisfied with their health plan and very few made changes during this year's annual enrollment. Only 2,700 members, or 1.8% of enrollees, changed health plans this year. More than two-thirds of the GIC enrollees who changed plans during annual enrollment chose Select & Save plans. These plans give members financial incentives for choosing cost-effective quality hospitals and selective networks. Almost 1,000 members chose Navigator by Tufts Health Plan, which has a three-tier hospital network based on quality and cost-effectiveness. The second most popular option was the Commonwealth Indemnity Community Choice Plan. Nearly 600 members switched to this plan, which has 45 cost-effective hospitals in its network. Additionally, 120 members enrolled in the Fallon Community Health Plan Direct Care option, which has a selective network.



Select & Save plans give members lower co-pays and deductibles for choosing quality cost-effective providers. Health plan premiums continue to escalate at unsustainable rates, and this year was no exception with the GIC's rates increasing an average of 14%.

Study after study has shown that there are wide disparities between hospitals and physicians in terms of both quality and cost efficiency. Last year, the GIC implemented an innovative approach to address these gaps as part of our efforts to contain costs, improve care, and maintain comprehensive coverage. Called the Clinical Performance Improvement (CPI) Initiative, the GIC began gathering data from health plans to identify cost and quality differences among providers. Plans that use this data to reward members for choosing quality cost-effective care are designated as a Select & Save Plan.

Almost all non-Medicare plan options will become Select & Save plans next year, providing GIC members with information and financial incentives to use cost-effective, high-quality health care providers. We will provide more details about these plans as the year progresses.

**Over 6,700 GIC enrollees
attended this year's health
fairs. The Saturday fairs
were particularly popular
with many families in
attendance.**

*See inside for photographs
from one of this year's fairs.*

Drug Formularies Are Determined Through Multi-Step Process

Question:

After the U.S. Food and Drug Administration (FDA) reviews a prescription drug's safety and efficacy and releases it to the market, how does a drug get approved for a plan's drug formulary?

Answer:

Pharmacy Benefit Managers (PBMs), which manage prescription drug benefits for health plans, follow a multi-step process for determining whether or not a drug is placed on their formulary. Express Scripts, the PBM for Commonwealth Indemnity Plan members, uses the following processes (other PBMs have similar practices):

1) The Therapeutic Assessment Committee, comprised of pharmacists and Express Script's medical director, evaluates a drug after its approval by the FDA. The committee conducts a thorough clinical review to evaluate a drug's safety, efficacy and dosage. Side effects, toxicities,

and drug interactions are also reviewed. The committee then ranks the drug within its therapeutic class according to its relative effectiveness.

- 2) The Value Assessment Committee (VAC), composed of pharmacists, product management, account management and financial analysts, then reviews the recommendation of the Therapeutic Assessment Committee. This committee evaluates the medication based on its cost relative to clinically-equivalent products.
- 3) The Pharmacy and Therapeutics (P&T) Committee, consisting of physicians from a broad range of medical specialties, as well as pharmacists, meets to review the recommendations from the first two committees, and the P & T Committee decides whether to include the drug on its formulary. This committee also determines where on the formulary (e.g., Tier 1, Tier 2, or Tier 3) the drug should be placed.

Express Scripts Benefit Reminders

Commonwealth Indemnity Plan Members, keep in mind the following prescription drug benefit changes effective July 1, 2005:

- ❖ Your physician must write a prescription to have Prilosec OTC (over-the-counter) covered by the Plan. You will save money by using this new option.
- ❖ Generic Zantac 150 mg, for ulcers and stomach acid, will no longer be covered, as it is available without a prescription.

See your plan handbook for other important changes.



The GIC's Executive Director, Dolores L. Mitchell, stands with David L. Flynn (D-Bridgewater), the Dean of the House of Representatives.



Tufts Health Plan sponsored relaxing massages at this year's GIC health fairs.



Harvard Pilgrim Health Care offered vision screenings.



Plan Now for Fall Childcare Needs



If you will need childcare services in the fall, it's not too soon to begin your search. Finding quality care is important to both you and your child. You need someone that you trust, which will help you return to work with peace of mind. Your child needs someone who provides a nurturing environment. The following steps can help ensure a successful match for you and your child:

Determine What Environment Meets Your Needs

- ❖ Location – what location will be most convenient for you – at or near home or work?
- ❖ Hours Available – how early do you need to drop off your child and how late will you be picking your child up? What days of the week do you need care?
- ❖ Type of Care – would you prefer your child to be in a center or home environment?

Plan Your Budget

Given your family income, determine how much you can spend on care. Costs for childcare vary greatly. Generally, costs are highest for infant care and for a nanny to come to your house. Costs also vary by community. Financial assistance is available for eligible families based on income. To find out if you qualify, contact the Child Care Resource and Referral Agency in your part of the state (*see page 4 for contact information*).

Research by Phone and Internet

If you are a member of a Commonwealth Indemnity Plan or Navigator by Tufts Health Plan, take advantage of UBH's Employee Assistance Program (EAP). They will do some of the leg work for you, contacting providers in your area that meet your needs to see if there is an opening for your child. UBH will also send you a helpful packet of materials to assist with your search, including outlines of various childcare options and worksheets to take on your interviews with potential providers. The LifeBalance® program, available to all GIC enrollees through the life insurance carrier, UnumProvident, also provides similar resources. Online community forums may complement these efforts.

If you will be using a provider outside of your home, whether it be in a childcare center, an after school program, or in a family childcare home, check to see whether the provider is licensed by the Massachusetts Department of Early Education and Care (formerly the Office of Child

Care Services). Licensed providers must have special training, first aid and CPR certification, and criminal background checks, and the care they provide must be healthy, safe, and offer activities that help your child develop and grow.

Interview Prospective Providers in Person

When visiting childcare centers or homes, keep your eyes open. How clean and neat is it? Are there toys suitable for your child's age group? Is the license posted? Does it look safe (e.g. are electrical outlets covered and will children be protected from stairs and animals)? Evaluate how the provider(s) interacts with children. Are the children's needs met quickly and do the caregivers seem patient?

Bring a list of questions with you to ask the provider. See if the provider's approach complements your own. Find out what the typical activities will be for the day. Ask about payment, illness, vacation, medicine administration, and discipline policies. Always trust your instincts. If it doesn't "feel right," it probably is not a good place for your child.

Check References

If you are pleased with a provider, ask the provider for the names and phone numbers of three or four parent references. When contacting the references, ask the parents what they liked most and least about the provider, and whether or not they would recommend the provider to a friend.

Prepare for the Transition

Lorraine Cruz, a Work/Life Supervisor at United Behavioral Health, says that many parents are unprepared for the emotional impact of leaving their child at childcare. Frequently parents have difficulty separating from their child, compounding the difficulty of the separation for both the parent and the child. She suggests that parents inquire about arranging to pay the provider for a brief transitional period. Leaving your child with the provider for a few hours at a time before returning to work on a full-day basis can ease the transition for both you and your child.

Once Your Child is In Care

Stay involved through regular communication with your child's provider. A few extra minutes at drop off and pick up times to hear about your child's day, or to share important information about your child, will help your child's experience be successful. If possible, visit while your child is in care and participate in special activities or events.

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Plan Now for Fall Childcare Needs

continued from page 2

Childcare Resources

LifeBalance® – Internet and telephone resources to assist with finding childcare and helping with transition issues – 1-800-654-1466, www.lifebalance.net. (*ID and password: lifebalance*)

United Behavioral Health – Employee Assistance Program (EAP) Services for members of the Commonwealth Indemnity Plans and Navigator by Tufts Health Plan 1-888-610-9039, www.liveandworkwell.com (*access code: 10910*)

Department of Early Education and Care (formerly OCCS) – find licensed childcare providers and research specific providers: 1-617-988-6600, www.qualitychildcare.org.

Child Care Resource and Referral Network – locate childcare and information about help in paying for childcare: 1-800-345-0131, www.masschildcare.org.

Commonwealth Children's Center – childcare for state employees located at One Ashburton Place in Boston: 1-617-727-4802, www.commchildcenter.com.

New Baby and Returning to Work? Commonwealth Employees Eligible for DCAP

If you are an employee who has a baby and are returning to work, you may be eligible to enroll in the pre-tax Dependent Care Assistance Program (DCAP). This is considered a "qualified event", enabling you to enroll in the program during the year. DCAP helps you pay for childcare expenses on a pre-tax basis, saving money on federal and state taxes. Elect up to \$5,000 annually and the election amount is divided equally and deducted from your remaining 2005 paychecks.



For eligibility, forfeiture rules, and pre-tax program details see your payroll coordinator, or the GIC's website. The DCAP and Health Care Spending Account (HCSA for out-of-pocket medical expenses) open enrollment for the 2006 calendar year will take place early October to early November. See the next issue of *For Your Benefit* and our website for details.

Opinions Wanted

This summer you may receive a survey from the GIC's partner, the Center for Survey Research at UMass Boston. The survey asks for your views and experiences with GIC programs and benefits. The GIC welcomes feedback from our members and looks forward to learning what you think. Remember – your answers will be completely anonymous and GIC staff will not see any individual responses.



UnumProvident's Erin Gilmartin discusses life insurance benefits with a GIC enrollee.



Katie Green waits for her Boston Heart Party™ cholesterol results.

Louis Freedman Appointed to the GIC's Institutional Review Board (IRB)

The Commission recently appointed Louis I. Freedman, former Commissioner of the Massachusetts Division of Health Care and Policy, to the GIC's Institutional Review Board (IRB). Mr. Freedman is very well acquainted with the GIC, having served in the past as a Commissioner-designee for the Division of Insurance. For nearly two decades, he served in numerous capacities at the Department of Public Health.

Mr. Freedman is currently serving as the interim Chief Executive Officer of the Massachusetts Health Care Consortium, following the recent death of its Executive Director, Elliot Stone. Mr. Stone was a long time friend of the GIC and also served on the GIC's IRB; his loss is profoundly felt by the health care community.

The IRB, established in 1999, evaluates the merits of outside research proposals using GIC data and ensures the protection of member confidentiality. In addition to GIC staff members, other members of the IRB include Elizabeth Pappius, Director of Health Information at Harvard Vanguard Medical Associates, Ray Campbell, a private attorney specializing in information technology security, and Frank Reilly, M.D., former Group Medical Director/Associate Regional Medical Director of Kaiser Permanente in Massachusetts.

"I Need a Cigarette. Or, Not..."

According to the U.S. Centers for Disease Control (www.cdc.gov/tobacco):

- ❖ \$89 billion: total annual public and private health care expenditures caused by smoking
- ❖ \$1,000: amount of money typical smoker spends each year on tobacco
- ❖ 3,000,000: number of teens and children in the U.S. who smoke cigarettes
- ❖ Nearly 90%: percent of smokers who begin at or before age 18
- ❖ 46,000,000: number of U.S. adults who smoke cigarettes
- ❖ 35,000: number of annual deaths from secondhand smoke exposure
- ❖ 4,000: Number of chemicals in tobacco smoke, including carbon monoxide, formaldehyde, and arsenic
- ❖ \$34 million: amount tobacco industry spends daily to market its products nationwide¹
- ❖ 400,000: number of Americans who die each year as the result of tobacco-related illnesses – almost 1 out of 5 deaths - more than from AIDS, car crashes, alcohol, suicides, homicides, fire and illegal drugs combined

¹ U.S. Federal Trade Commission Cigarette Report for 2002



It's Never Too Late to Quit

The U.S. Surgeon General's Reports of 1998 and 1990 found:

20 minutes after quitting: Your heart rate drops.

12 hours after quitting: The carbon monoxide level in your blood drops to normal.

2 weeks to 3 months after quitting: Your circulation improves and your lung function increases.

1 to 9 months after quitting: Coughing and shortness of breath decrease; cilia (tiny hair-like structures that move mucus out of the lungs) regain normal function in the lungs, increasing the ability to handle mucus, clean the lungs, and reduce the risk of infection.

1 year after quitting: The excess risk of coronary heart disease becomes half that of a smoker's.

5 years after quitting: Your stroke risk is reduced to that of a nonsmoker.

10 years after quitting: The lung cancer death rate is about half that of a continuing smoker's and the risk of cancers of the mouth, throat, esophagus, bladder, cervix, and pancreas decrease.

15 years after quitting: The risk of coronary heart disease is that of a nonsmoker's.



Fallon Community Health Plan's Jen Lavigne holds up a jar representing the amount of tar an average smoker inhales into his/her lungs in a year.



Don't Go It Alone Resources to Help You Quit Smoking



Smoking is extremely addictive and quitting is not easy. The following resources can help you quit:

Quitworks: The Department of Public Health, in collaboration with major health plans, provides telephone and web-based programs to assist Massachusetts residents with smoking cessation. Your doctor may refer you to this resource, or you can self-refer by visiting www.quitworks.org or calling 1-800-TRY-TO-STOP (1-800-879-8678). From this site, you can access the Try To Stop Tobacco web-based resource. Resources include a personalized quit plan, bulletin boards and contact information for community-based programs.

Tufts Health Plan MOMS Program – Mom and Me Smoke Free Cessation program for pregnant women: Members are mailed smoking cessation materials specific to pregnant smokers.

Fallon Community Health Plan Tobacco Program: Weekly group sessions are offered free of charge and are open to anyone. Sessions are held at Fallon Clinic sites in Auburn, Leominster, Spencer and Worcester. Fallon members receive nicotine patches at a discounted rate, as well as access to telephone counseling. For additional details, call toll-free 1-888-807-2908.

Letters to the Editor



"I would appreciate it if one of the health fairs could be held in the Metro West area. Surely Framingham, Natick, Wayland, or the city of Marlborough have venues where a health fair could be held."

K. Murdock, Marlborough, MA

Editor's note: The GIC selects health fair locations based on where enrollees work and reside, state facility size, parking, handicapped accessibility, public transportation access if possible, and turnout from previous years. Unfortunately, there are no state agencies in that area that can currently accommodate a GIC health fair.

"At 77 years of age due to meticulous nutrition, exercise and lifestyle, I have been fortunate not to have to take any medication, so it was quite an experience when I fell and broke my patella and wrist. How grateful I am to the GIC for their prompt payment of the hospital, rehab, and many expenses that were incurred. I had to pay very little out of pocket co-pays. I hope to get back to weight lifting and volunteering soon. It is human nature to criticize and complain, but I think a thank you should be extended when it is deserved."

M. Brown, New Bedford, MA.

The GIC welcomes your feedback. We will include selected letters in our newsletter. Or, submit a letter and request that we not reprint it. The GIC reserves the right to edit your comments for clarity and space considerations. All letters must be signed with your name and address. Send Letters to the Editor to Cynthia McGrath, Editor, *For Your Benefit*, Group Insurance Commission, PO Box 8747, Boston, MA 02114-8747.

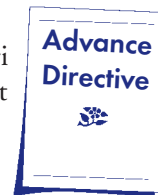
Senator Jarrett T. Barrios (D-Cambridge) gets his blood pressure checked by a Boston Heart Party™ representative.



Unicare's Debbie Fraser compares and contrasts benefits of the Commonwealth Indemnity Plan options.

Don't Put Off Life Or Death Decisions

Anyone who has read or watched the news knows about the tragedy of Terri Schiavo. This case highlights the fact that, no matter how old you are, tragedy can strike, and it's important that you have clearly outlined your medical wishes in the event you become incapacitated and are unable to speak for yourself. How do you want your care to be handled at the end of your life? Your loved ones need to know. Although these are not easy discussions, it is important to address them. Your Advance Directive communicates your wishes.



There are two parts to the Advance Directive: The *living will* lists medical procedures that you do or do not want under certain circumstances. The *health care proxy* names the person whom you authorize to make sure medical personnel carry out your wishes. These forms are available through your doctor, hospital, and nursing home. The Massachusetts Medical Society also has a model health care proxy on its website: www.healthcareproxy.org.

To ensure you have a comprehensive Advance Directive in place, the Central Massachusetts Partnership to Improve Care at the End of Life (www.betterending.org) recommends the following:

- ❖ Think about your end-of-life wishes and share these with your family
- ❖ Choose a health care agent and an alternate
- ❖ Discuss your wishes with your agent, alternate, doctors, spiritual advisor, family and attorney
- ❖ Complete the Massachusetts Health Care Proxy (two non-agent witnesses must be present)
- ❖ Complete your statement of wishes (living will)
- ❖ Give copies of the proxy and living will to your agent, alternate, doctors, spiritual advisor, family and attorney
- ❖ Review and update the forms as needed

Age 65+ Commonwealth Indemnity Plan Members Will Receive Advanced Care Planning Forms

Unicare will send all Commonwealth Indemnity Plan members age 65 and over end-of-life planning materials. Members will receive educational materials in the early summer. In the fall you will receive advance directive forms and additional helpful materials. Take advantage of these mailings and make sure you are prepared in case you have a medical emergency -- complete your living will and designate a health care agent.

Pilot Programs Help Members Take Strides to Better Health

Four new programs help members take better care of their own health. In addition to the end-of-life planning program for Commonwealth Indemnity Plan members (see article on page 6), three other programs will be introduced over the summer:



Walk This Way: Just in time for summer, Health New England is kicking off an easy-to-do walking competition. Commonwealth

employees in selected western Massachusetts agencies can participate. Employees will compete against each other to walk 10,000 steps to good health. Participants complete a web-based health risk assessment, which tracks your baseline blood pressure, body mass index, cholesterol and glucose measurements. After completion of the survey, you will receive a pedometer, which will track how far you walk. Participants log their steps each day and submit a monthly mileage record. This chart is your entry into a raffle for great prizes. Through walking and following other program tips, you should see some great health improvements in your follow-up health risk assessments. Employees at participating agencies will receive additional details.

Improve Your Health Knowledge: Members of Fallon Community Health Plan will receive a medical reference manual, the *Healthwise® Handbook*. This book includes comprehensive and current health-related information to help you take charge of your own health.

Understand Your Medications: Selected members of Neighborhood Health Plan will receive personalized prescription drug counseling. A pharmacist will come to your home or health site to assist you with understanding how the medications you take work to improve your health, how to take them correctly, what side effects you may experience, and how to mitigate against these effects.



Benefit Access	
Health Insurance	
Commonwealth Indemnity Plan, Commonwealth Indemnity Plan PLUS, Commonwealth Indemnity Community Choice Plan, Indemnity Medicare Extension (OME) Plan (UNICARE)	1-800-442-9300 www.unicare-cip.com
Commonwealth Indemnity Plans' Prescription Drugs (Express Scripts)	1-877-828-9744 www.express-scripts.com
Commonwealth Indemnity Plans and Navigator by Tufts Health Plan Mental Health, Substance Abuse, EAP (United Behavioral Health)	1-888-610-9039 www.liveandworkwell.com (access code: 10910)
Navigator by Tufts Health Plan	1-800-870-9488 www.tuftshealthplan.com/gic
Fallon Community Health Plan Direct Care, Select Care Senior Plan	1-800-868-5200 www.fchp.org
Harvard Pilgrim Health Care POS First Seniority	1-800-333-4742 1-800-421-3550 www.harvardpilgrim.org
Health New England HMO, MedRate	1-800-310-2835 www.healthnewengland.com
Neighborhood Health Plan	1-800-462-5449 www.nhp.org
Tufts Health Plan Medicare Complement Secure Horizons (name changing to Tufts Health Plan Medicare Preferred 7/1/05)	1-800-870-9488 1-800-867-2000 www.tuftshealthplan.com
Other Benefits	
Life Insurance and AD&D (UnumProvident)	Call the GIC 1-617-727-2310, ext. 1 www.mass.gov/gic
Long Term Disability (LTD) (The Hartford)	1-866-847-6343 www.maemployeesltd.com
Employee Assistance Program (EAP) Accessed by Managers and Supervisors (United Behavioral Health)	1-617-558-3412 www.liveandworkwell.com (access code: 10910)
Health Care Spending Account (HCSA) and Dependent Care Assistance Program (DCAP) (Sentinel Benefits)	1-888-762-6088 www.mass.gov/gic
LifeBalance®	1-800-854-1446 www.lifebalance.net (password and ID: lifebalance)
GIC Retiree Vision Discount Plan (Davis Vision)	1-800-783-3594 www.davisvision.com
GIC Retiree Dental Plan (Altus)	1-800-722-1148 www.altusdental.com
Dental Benefits for Managers, Legislators, Legislative Staff and Executive Office Staff (Delta Dental)	1-800-553-6277 www.deltamass.com
Vision Benefits for Managers, Legislators, Legislative Staff and Executive Office Staff (Davis Vision)	1-800-650-2466 www.davisvision.com
Medicare (Federal Program)	1-800-633-4227 www.medicare.gov
State Board of Retirement	1-617-367-7770 www.mass.gov/treasury/srb.htm
Group Insurance Commission	1-617-727-2310 www.mass.gov/gic
TDD/TTY Access	1-617-227-8583
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? ? ? ? ? GIC Q&A ? ? ? ? ?

Q) When can I take my former spouse off my GIC health coverage?

A) If either you or your former spouse remarries, you must notify the GIC. If your former spouse remarries, coverage for him/her ends as of the date of remarriage. If you remarry, coverage may or may not be continued, depending upon your divorce decree provisions. If your former spouse has proof of his or her own health coverage, provide this proof, and your former spouse will be removed from GIC coverage.

Q) My student-dependent (age 19 or over) is graduating. When does health coverage end?

A) His/her coverage ends at the end of the month in which he/she ceases to be a full-time student. At that point your child is eligible for GIC COBRA health coverage or for non-group conversion coverage.

Q) Is my student-dependent (age 19 or over) covered during the summer months?

A) Your student-dependent is covered during the summer only if he/she was enrolled and attending classes as a full-time student for the entire spring semester and is enrolled as a full-time student for the fall semester.

For additional questions to common GIC benefit questions, see the "Your GIC Records" section of our website www.mass.gov/gic.

Medicare Part D Reminder

GIC Medicare enrollees will soon receive multiple solicitations to join the new Medicare Part D prescription drug discount card program. The Medicare Part D program is for retirees without drug coverage. You already have prescription drug coverage through your GIC health plan and all GIC plans offer more comprehensive coverage than the Medicare Part D choices. So, do not sign up for Medicare Part D!

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Providing Massachusetts State Employees, Retirees, and Their Dependents with Access to Quality Care at Reasonable Costs

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